PTO/SB/22 (08-03)

Approved for use through 7/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

rk Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Officer the Caperwork Reduction Act of 1000; no poroons a	o rodanse is respend to a							
Docket Number (Optional) 17354								
In re Application of Mayerle								
	Application Number 10/813,225 Filed 03/30/2004							
	For Equalizing Meter	r Device						
	Art Unit 3671		Examiner J	ulianne M. Co	zad			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.								
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):								
X One month (37 CFR 1.17(a)(1))					\$ <u>120.00</u>			
Two months (37 CFR 1.17(a)(2))			•		\$ <u>450.00</u>			
Three months (37 CFR 1.17(a)(3))					\$ <u>950.00</u>			
Four months (37 CFR 1.17(a)(4))					\$ <u>1,480.00</u>			
Five months (37 CFR 1.17(a)(5))					\$ <u>2,010.00</u>			
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$								
X A check in the amount of the fee is enclosed.								
Payment by credit card. Form PTO-2038 is attached.								
The Director has already been authorized to charge fees in this application to a Deposit Account.								
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number50-1170								
I have enclosed a duplicate copy of this sheet.								
I am the applicant/inventor.								
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
attorney or agent of	record. Registration N	lumber _	53,163					
x attorney or agent un Registration number	der 37 CFR 1.34(a). if acting under 37 CFR 1	.34(a) <u>53,</u>	<u>163</u> .					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO 2038.								
February 6, 2006		02	well.	M.				
Date			Signature		ស្ត			
(414) 225-9755	<u>Wil</u>	liam T. I			 10813225			
Telephone Number		• •	ed or printed na					
NOTE: Signatures of all the inventors or assignees of rethan one signature is required, see below.	cord of the entire interest or the	neir represer	ntative(s) are requir	red. Submit multiple	forms if more			
Total of forms are	submitted.				501			

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to compete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any competence on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petents and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. 02/08/2006 HDESTA1

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paper	Work Reduction A	ct of 1995, no	persons are requ	uirea to respona t	o a collection of info		olays a valid OMB control number.			
Effective on 12/8/2004. Fees pure La Touris Act, 2005 (H.R. 4818).						Complete if Known				
				cation Number	10/813,225					
FEE TRANSMITTAL			Filing		03/30/2004					
			First	Named Inventor	Mayerle					
For FY 2005			Exam	iner Name	Julianne M. C	ozad				
Applicant Claims small entity status. See 37 CFR 1.27				Art U	nit	3671				
TOTAL AMOUNT OF PAYMENT (\$) 320.00				Attorr	ey Docket No.	17354				
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
X Deposit Account	Deposit Accou	nt Number: <u>5</u>	0-1170	Deposit /	Account Name: B	oyle Fredrickson N	ewholm Stein & Gratz S.C.			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charges fee(s) indicated below, except for the filing fee										
X Charge any additional fee(s) or underpayments of fee(s) X Credit any overpayments										
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and										
authorization on PTO-2038. FEE CALCULATION										
1. BASIC FILING, SEA	BCH VND E	ΥΔΜΙΝΔΤΙ	ON FEES							
I. DASIC FILING, SEA	FILING F	EES	SEARC	HFEES	EXAMINA'	TION FEES				
	<u>Sn</u>	nall Entity	<u>s</u>	mall Entity	<u>Sr</u>	mall Entity				
Application Type		ee (\$)	-	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)			
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0	- 			
2. EXCESS CLAIM FE	ES						Small Entity			
Fee Description	C D .	1					Fee (\$) Fee (\$) 50 25			
Each claim over 20 or,	tor Keissues, e	ach claim (over 20 and m	ore man in the	e onginal patent	iainal natant	200 100			
Each independent clain		Keissues,	each independ	ient ciaim mo	re man in me on	igniai patent	360 180			
Multiple dependent clair		En	o (\$)	Fee Paid (\$)		Multiple Depende				
Total Claims 18 - 20 or HP =	Extra Claims 0	x <u>Fe</u>	<u>e (\$)</u> =	0		Fee (\$)	Fee Paid (\$)			
HP = highest number of total da										
Indep. Claims 4 - 3 or HP =	Extra Claims			Fee Paid (\$) 200						
HP = highest number of indepe	ndent claims paid f									
3. APPLICATION SIZE	FEE									
If the specification and	drawings exce	ed 100 she	ets of paper, th	he application	size fee due is	\$250 (\$125 fo	r small entity)			
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
- 100		/50=			a whole number)		= Fore Doid(\$)			
4. OTHER FEE(S)			11	11 ()			Fees Paid(\$)			
Non-English Specification, \$130 fee (no small entity discount)										
Other: one-month extension of time \$120.00										
SUBMITTED BY	//	1/								
Signature	Just	1m		gistration No. prney/Agent)	53,163	Telepl	hone 414-225-9755			
Name (Print/Type) Willi	iam T. Kryger		—			Date	February 6, 2006			
The state of the s		- da / l	The laterant		a abtain as satain s	honofit by the put	olic which is to file (and by the			

This collection of information is required by 37 CFR .186. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially & governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.